# GOVERNMENT OF THE DISTRICT OF COLUMBIA Department of Health Care Finance



### Office of the Deputy Director-Medicaid

Transmittal # 21-29

TO: All DC Home Health Agency (HHA)Medicaid Providers

FROM: Melisa Byrd

Senior Deputy Director and State Medicaid Director

DATE: June 24, 2021

SUBJECT: Home Health Agency (HHA) Living Wage Rate Changes Effective July 1, 2021

## **Purpose**

The purpose of this transmittal is to notify HHA providers of changes to the reimbursement rates for Personal Care Aide (PCA) services provided by the HHA and changes to the current enhanced reimbursement rates for HHA due to COVID-19 (Transmittal # 20-26), to reflect the increase in the Living Wage. The PCA services reimbursement rates are adjusted to reflect the annual rate changes to the Living Wage Act of 2006, effective June 8, 2006 (D.C. Law 16-118; D.C. Official Code § 2-220.01 *et seq.* (2012 Repl.)). **The changes to the rates will become effective July 1, 2021**.

The table below provides a listing of both the billing codes and new rates for PCA services. The Medicaid Fee Schedule for the PCA services is located on the DHCF website at <a href="https://www.dc-medicaid.com/dcwebportal/nonsecure/feeScheduleDownload">https://www.dc-medicaid.com/dcwebportal/nonsecure/feeScheduleDownload</a>.

Code	Service Description	Reimbursement Rate			
T1019-NP	State Plan	\$ 22.13 Per Hour, \$5.53 per 15 minutes			
	Personal Care Aide	\$ 22.13 Per Hour, \$5.53 per 15 minutes			
	Services				
T1019-52	Personal Care Service	\$ 22.13 Per Hour, \$5.53 per 15 minutes			
	Per 15 Min				
T1019-U3	EPD Waiver Services	\$ 22.13 Per Hour, \$5.53 per 15 minutes			
	Per 15 Min				
T1019-NP-	EPD Waiver Services	\$ 22.13 Per Hour, \$5.53 per 15 minutes			
U3	Per 15 Min				
T1019-	ASSESSED AND	\$ 22.13 Per Hour, \$5.53 per 15 minutes			
UT-U3	SERVICES BEING				
	TERMINATED				

T1019-52-	ASSESSED AND	\$ 22.13 Per Hour, \$5.53 per 15 minutes
U3	SERVICES BEING	
	REDUCED	

## **Enhanced Billing & Reimbursement Reflects Living Wage Changes**

The temporary enhanced reimbursement rates, procedure codes, and modifiers are outlined in the separate tables below for HHA services. To receive the enhanced reimbursement rates, HHAs providers must submit claims with the correct procedure codes and modifier combinations.

## **HHA**

Service Description	Procedure Code	Overtime Modifier	Overtime Rate	Quarantined Modifier	Quarantined Rate	Quarantined Overtime Modifier	Quarantined Overtime Rate
PCA - State Plan Services per 15 Min	T1019	CR	\$33.19 per hour, \$8.29 per 15 minutes	CR-U1	\$33.19 per hour, \$8.29 per 15 minutes	CR-U2	\$49.78 per hour, \$12.44 per 15 minutes
PCA - EPD Waiver Services per 15 Min	T1019	CR-U3	\$33.19 per hour, \$8.29 per 15 minutes	CR-U1	\$33.19 per hour, \$8.29 per 15 minutes	CR-U2	\$49.78 per hour, \$12.44 per 15 minutes

## Contact

DHCF will continue to provide updates to this information as appropriate. If you have questions, please contact Andrea Clark, Reimbursement Analyst, Office of Rates & Reimbursements, at <a href="mailto:Andrea.Clark@dc.gov">Andrea.Clark@dc.gov</a> or 202-724-4096.

**Cc:** DC Hospital Association

DC Primary Care Association

DC Health Care Association

DC Home Heath Association

DC Behavioral Health Association

DC Coalition of Disability Service Providers

Medical Society of DC